

# ACR Mammography Accreditation Program

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# Objectives

By the end of the session, the participant will be able to:

- ~ Be familiar with the ACR Mammography Accreditation Application Process.
- ~ Recognize the difference between ACR and MQSA.
- ~ Identify important deadlines in ACR Process.

# Statistics

- ACR is the country's largest accrediting body for mammography
- There are over thirteen thousand units accredited by ACR as of July 2006
- In 1994, pass rate was 70%
- In 2005, pass rate for new or renewal accreditation was 90% (First Attempt)



# What is ACR?

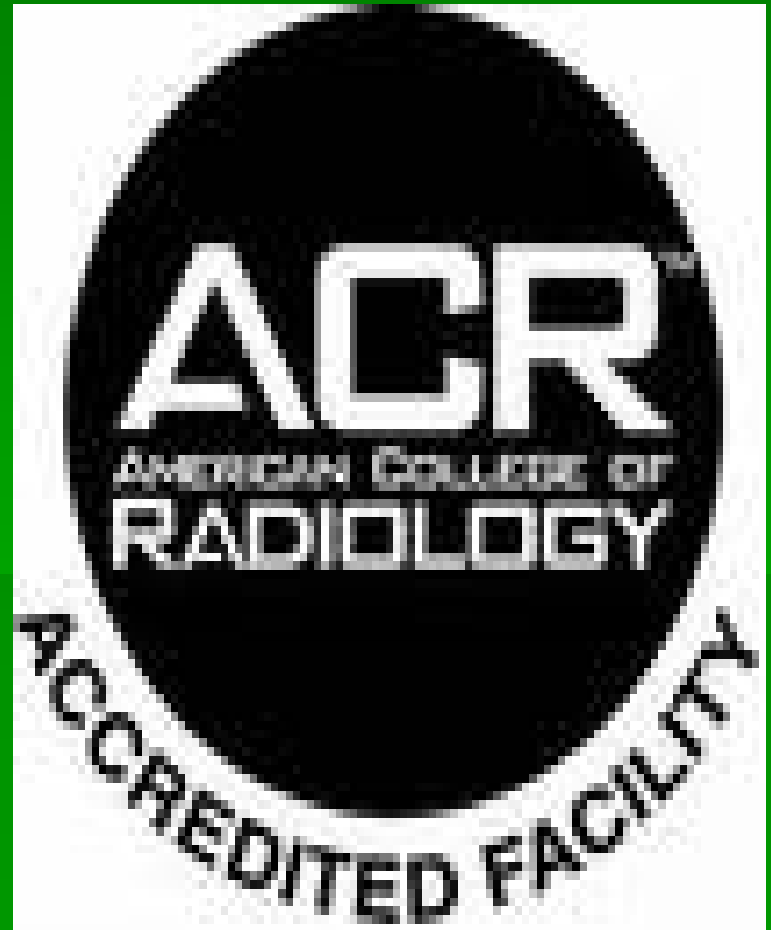
- American College of Radiology
- Initially developed in 1987
- Accrediting body approved by the FDA for screened film and full field digital mammography.
- Provides: peer review, constructive feed back on staff qualifications, equipment, quality control, quality assurance, image quality, and radiation dose.

# What is MQSA?

- The Mammography Quality Standards Act

# The ACR process

- Preliminary Application
- Initial or Renewal Accreditation Application
  - Receive full packet
  - Make copies
  - Mark calendar



# Personnel Section of Application

- Radiologist
- Physicist
- Technologist
- Signature requirements





# Equipment and Processor



- Screen and Digital
- Test requirements
  - processor QC chart
  - ~daily & weekly test
  - ~monthly, quarterly, and semi-annual test
  - ~physicist survey report
  - ~corrective action
- When in doubt, ask your service technician

# Clinical Images for Application

## Finding “your best work”

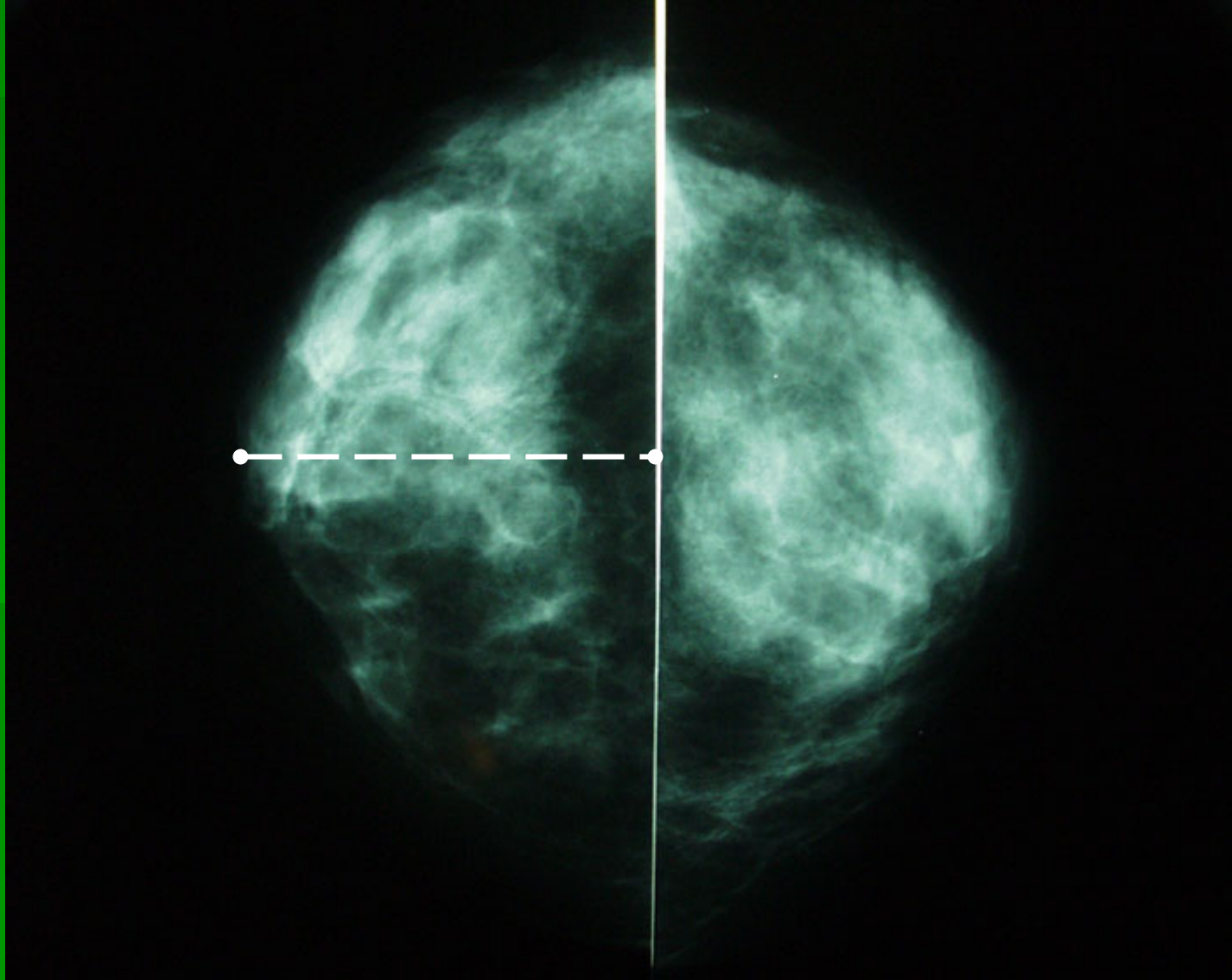
- Make a list as soon as you receive application. Put sheet up for fatty, dense (date, patient #, room #) in technician viewing area.
- Need one complete exam of fatty and dense breast for each machine.
- The clinical images are time consuming and the most difficult to obtain.

# Clinical Images for Application

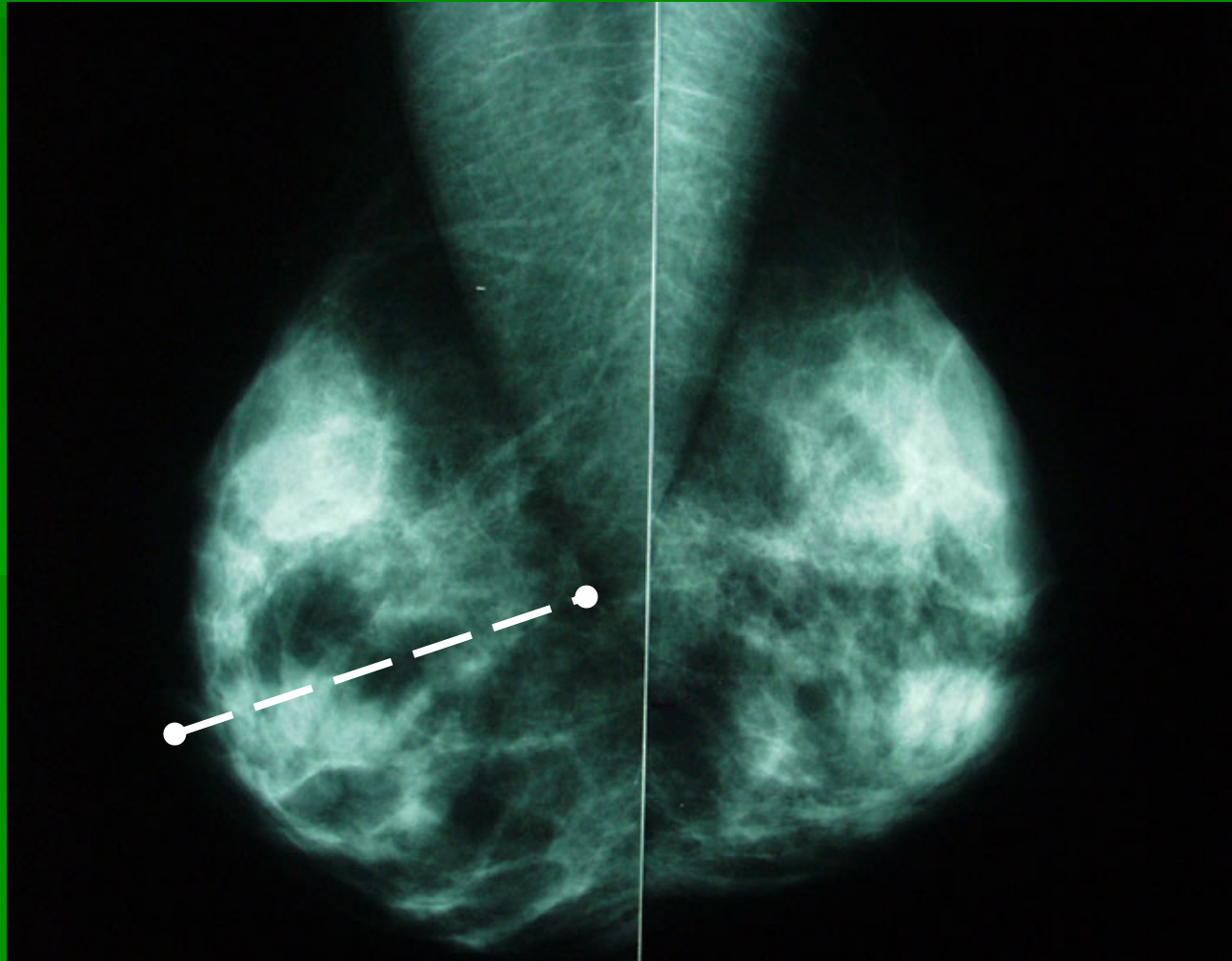
## What to Look for:

- Must Be: Negative (BiRads Assessment Category 1)
- Two ACR radiologist will score the films
- Clinical Review parameters- positioning, compression, exposure level, sharpness, contrast, noise artifacts, exam identification
- Entire breast must be imaged in single exposure on each projection
- Does not matter what image receptor size 18x24 or 24x30.
- Positioning CC- pectoralis muscle if possible (only visualized in about 30-40% of patients)
- General rule: length of posterior nipple line on CC view should be within 1 cm of its length on MLO. As much lateral tissue as possible, but not at the expense of medial tissue.
- Positioning oblique- pectoralis muscle down to posterior nipple line, not sagging, open inframammary fold.

# Clinical Image



# Clinical Image



# Clinical Images for Application

## Labeling- required

- Patient Name (first and last)
- Additional patient identifier MR# or SS# (date of birth is less desirable)
- Date of exam
- View and laterality
- Facility name and location city, state, and zip
- Technologist
- Cassette/ Screen identification
- Mammography unit if more than one

## Labeling strongly recommend ( but not required )

- Flashcard ID (instead of sticker)

## Labeling- recommend ( but not required)

- Separate date stickers
- Technical factors used

“Clinical Image Evaluation” 1999 ACR Quality Control Manual

# Clinical Images for Application

## Review Films

- Evaluate Films
- Narrow down 3 to 5 (fatty and dense) exams.
- After you have all your films, have lead interpreting physician make final decision.
- Send in original films, make copies of films, keep copies with the patient film jacket until the originals are returned. Put labels on films.

# Phantom Image and Dose for Application

- Preliminary without dosimeter
- Clinical Technique Factors
- Clinical & Phantom images must be within the same 30 day time frame
- Additional dosimeter- fee



# Helpful Hints to remember

- ACR requires renewal every 3 years
- Remember dates
  - ~45 days
  - ~60 days
- MAP ID#( Mammography Accreditation Program Identification Number)

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

# Submitting your application

- Copy completed application
- Double check your “checklist”
- Mail application by express or certified mail with return receipt
- Accreditation and feedback

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>		A. Received by (Please Print Clearly) B. Date of Delivery	
1. Article Addressed to:		C. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Copy from service label)		3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, July 1999 Domestic Return Receipt 102395-00-M-0952			

# Annual Updates

- ACR is required to evaluate and update every accredited facility once a year.
- Annual update form. (Contacts, lead interpreting physician etc.)
- A copy of recent medical physicist report summary for each unit.
- Documentation for all corrective action, for failures noted your medical physicist Annual Survey.
- Identify changes in address and personnel.
- Any change in lead interpreting physician must contact ACR immediately. Other personnel radiologist, technologist, medical physicist should be reported at next renewal or state inspection.
- Any change (add, replace, or move) mammography units, Call ACR as soon as possible- for requirements.

# Validation Film Checks

- Random clinical image reviews
- Mid-cycle image quality
- Approx 300 random selected facilities each year are mailed validation film checks.
- Evaluates- clinical images, phantom images, dose, quality control.
- ACR recognizes that clinical images selected for this evaluation, are drawn from small sample of films. They do take this into consideration.

# On- Site Surveys

- **Conduct on-site surveys of accredited facilities.**
- **Facility will be notified in advance.**
- **Team includes- ACR Radiologist, medical physicist, and ACR staff technologist.**
- **Review- QC program, mammography policies and procedure, personnel qualifications, clinical images and reports.**
- **All staff participating in the site visit will receive CE credits.**

# Contacting ACR

- Information line (800)227-6440
- Online: [www.acr.org](http://www.acr.org) under accreditation overview



# Comments/Questions





Yes I did have a Mammogram  
Today ... Why do you Ask?